PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

10621504

CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN											THAN	
			(Column 1)		(Column 2)		TYPE	TYPE -		OR	SMALL	YTITM
TOTAL CLAIMS			68				RAT	E	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	FEE	375.00	OR	Basic fee	750.00
TOTAL CHARGEABLE CLAIMS			6 8 minus 20=		*48		X\$ 9)=		OR	X\$18≈ •	\$864
INDEPENDENT CLAIMS			y minus3 =		5		X42	=		OR	X84 ≜ €	421.
MULTIPLE DEPENDENT CLAIM PRESENT							+14)=		OR	+280=	
* If the difference in column 1 is less than zero, enter					"0" in c	olumn 2	TOT	٩L		OR	TOTAL	9034.
CLAIMS AS AMENDED - PART II										•	OTHER	THAN
		(Column 1)	(Colum				SMA	LL I	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENOMENT		HIGH NUM PREVIO PAID	BER	PRESENT EXTRA	RAT	Έ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9)=		OR	X\$18=	
	Independent	* NTATION OF M	Minus	***	CL ANA	=	X42	#		OR	X84=	
	rino i rhebe	WATON OF IM	JEHREE DER	CINDEIN	CLAIIVI	<u>. L. l</u>	+140)=		OR	+280=	
								TAL		OR	TOTAL	
(O-lume 1) (O-lume 2) (O-lume 3)								FEE	<u> </u>	1011	ADDIT. FEE	
r		(Column 1) CLAIMS	,	(Colui		(Column 3)	l 		1001	۱ ا	,	ABBI
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9)= -		OR	X\$18=	
	Independent	*	Minus	***	. 01 4114	=	X42	=		OR	X84=	
<u> </u>	PINST PHESE	NTATION OF MI	JUIPLE DEF	ENDEN	CLAIM		+140)=		OR	+280=	
								TAL		OR	TOTAL	
		(Column 1)		(Colum	ma 2)	(Column 2)	ADDIT.	-EE		10.1	ADDIT. FEE	
_		(Column 1) CLAIMS		(Colui		(Column 3)				· ·		
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRESENT EXTRA	RAT	Е	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9	=		OR	X\$18=	
	Independent	*	Minus	***		=	X42	=		OR	X84=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									UN		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.							+140			OR	+280=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT. FEEO											TOTAL ADDIT. FEE	
		nber Previously Pa					er found in th	e apı	propriate box	c in co	lumn 1.	İ